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ABSTRACT

Compiled as a project of the National Resource Center on Family Based Services, this document contains an annotated directory of a representative listing of family-based services existing in 24 of the United States. (Family-based service programs provide humane, quality and cost-efficient services to families in the least restrictive environment, saving family members from often painful and counterproductive separation.) Listings are made alphabetically by state, and a contact person, address, and telephone number are listed for each program. (MP)

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ANNOTATED DIRECTORY OF

EXEMPLARY

FAMILY BASED PROGRAMS

Revised 1982 by the
NATIONAL RESOURCE CENTER ON FAMILY BASED SERVICES
SCHOOL OF SOCIAL WORK
THE UNIVERSITY OF IOWA OAKDALE CAMPUS
OAKDALE, IOWA 52319

HOME BASED FAMILY CENTERED

PS013046

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Deinstitutionalization, permanency planning, family reunification--these familiar phrases reflect recent efforts to rectify the undesirable results of a child welfare system which has neglected the family and its assets as our major social welfare institution. Recent data indicates that child-management approaches which tend to bypass or replace parents and family may be unnecessary for at least one-half of the cases now so managed. In addition, the high psychological social and monetary costs of behavior change attempted by placement of a family member have prompted greater discretion and development of alternatives. Alternatives to substitute care have gradually evolved since the time of the St. Paul Family Centered Project in the 1950s. The results of these home based family centered programs strongly suggest that the approach, even in some families with most extraordinary circumstances, could frequently be a viable alternative to out-of-home placement. The significance of parents as primary educators and the impact of family life on the development and remediation of problems are but two factors which have led to this promising and exciting approach.

In-home education programs recognize the parents and the family as the primary educators. Home based health service programs are based on the ecological considerations in health care, prevention of medical problems and child abuse, health maintenance, familial health care, and extension of service. Home based family centered social work programs are committed to the principle of making the first and greatest investment of resources in treating and caring for children and families in their own homes before turning to more radical substitute care approaches.

Family based service programs provide humane, quality, and cost-efficient services to families in the least restrictive environment, saving them from often painful and counter-productive separation. This service approach utilizes parents, other family--including extended family--, neighbors, friends, and natural support networks. Maximum use is made of community resources to provide comprehensive and concentrated service on the family's own turf.

This annotated program directory is a representative listing of exemplary Family Based services for children and families. It has been compiled as a project of the National Resource Center on Family Based Services. It is our hope that this directory will be useful to agencies which want to implement or expand alternatives to foster care programs. A contact person, address and telephone number are listed for each program. Many programs have descriptive literature available. Listings are made alphabetically by state.

Marvin E. Bryce, Director
National Resource Center on
Family Based Services

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ARKANSAS

SCAN SERVICE, INC.
4313 West Markham Street
Little Rock, AR 72205

Sharon Pallone, Ph.D.
(505) 371-2773

Private auspices, multiple-funding

This movement began in 1972. Volunteers, utilized as lay-therapists with professional supervision, provide services to families with suspected child abuse and neglect. Currently operating in 15 counties in Arkansas, the agency contracts with the Arkansas Department of Social Services. The major support has been by Title XX. In addition to lay therapy, Parents Anonymous and coordination of community services are important components. Lay therapists serve 2 or 3 families. The program has been replicated.

CALIFORNIA

FAMILY PROTECTION ACT PROJECT
San Mateo County Welfare Department
225 W. 37th Avenue
San Mateo, CA 94403

Elsa Ten Broeck
(415) 573-2736

Public funding

This is a demonstration project prompted by the 1976 California Family Protection Act. Service is limited to six months, with further service dependent on court action. The focus is on younger children of protective service families and is characterized by attempts by the public agency to coordinate and monitor existing services to families. Placements were reduced by 35 percent with a net saving of over one-half million.

FOLLOW-UP INTERVENTION FOR NORMAL DEVELOPMENT
Inland Counties Regional Developmental Disabilities Center, Inc.
814 Arrowhead Avenue
San Bernardino, CA 92401

Darlene Robinson
(714) 888-6631

State funds

The program provides services to infants identified as "at-risk" at birth, including birth defects, feeding problems, etc. Assessment, intervention, and referral services are provided through the mode of home visitation by a counselor who coordinates a comprehensive, individualized plan of assessments and interventions utilizing the services of community health care resources. The objectives of the program are to increase parental skills through guidance, assistance, and education, and also to increase the developmental level of "at-risk" infants and to prevent secondary handicaps in these infants. The program has been replicated in California.

SACRAMENTO COUNTY NEIGHBORHOOD ALTERNATIVE CENTER
3990 Branch Center Road
Sacramento, CA 95827

John Rhoades
(916) 366-2662

Public funding

The Center works with over 4,000 "acting out" adolescents and their families and includes program components of a home based family centered (HBFC) approach. Profiles of families served are very similar to client families of other HBFC service agencies. Immediate availability of service and focus on the family as the service unit were crucial elements in the 80 percent success rate reported. Other reasons identified for the success included special staff training, experienced staff, a supportive administration, community support, supervision, and around-the-clock availability.

SAN DIEGO CENTER FOR CHILDREN
In-Home Treatment Program
P. O. Box 11024
San Diego, CA 92111-0017

Ken Heying
(714) 277-9950

Private Auspices; funded by grants and fees

Program is utilized as either an option or an adjunct to residential and day treatment. Professional multidisciplinary team utilizes a variety of skills and treatment techniques. Duration of institutional care has been markedly decreased and the current focus is largely treatment without resorting to placement. The staff consider the program a very viable alternative to institutionalization.

SAN FRANCISCO HOME HEALTH SERVICE EMERGENCY FAMILY CARE PROGRAM
225 30th Street
San Francisco, CA 94131

Lou Fox, Director
(415) 285-5619

Private/public funding

Home based services (initiated in 1981) to families under stress or in crises include teaching household management, housekeeping, demonstrating parenting skills and child development/child care instruction, nutrition, referral, and emergency caretakers. Trained-in-family-care workers are supervised by professionals. Fees are determined on sliding scale. Referrals come from multiple sources and are accepted and services initiated from 10:00 a.m. to 10:00 p.m. seven days a week. Staff is always available to respond to calls.

SAN FRANCISCO RECREATION CENTER FOR THE HANDICAPPED
207 Skyline Boulevard S.E.
San Francisco, CA 44132

Janet Pomeroy
(415) 665-4100

Federal, state, and local funding

Designed to bring recreational activities to the severely handicapped and retarded in their own homes. Recreation is also provided to senior citizens in housing authority complexes, and an infant stimulation program is offered for children developmentally delayed or severely handicapped. Help is also provided in homemaking skills, health education, and life skills. Demonstrations given to care-takers on use of toys in the infant stimulation program.

COLORADO

COLORADO DEPARTMENT OF SOCIAL SERVICES
1575 Sherman Street
Denver, CO 80203

William Evans
(303) 866-3363

The 1979 legislation (Senate Bill 26) dramatically changes procedures for out-of-home placement of Colorado children. Included are fiscal incentives for counties to initiate alternatives to out-of-home placement and to develop options to institutional care.

HOME VISITOR PROGRAM
University of Colorado Medical Center
4200 East 9th, Box C277
Denver, CO 80262

Betty Kaplan
(303) 744-2133

Funded by the University of Colorado

Lay Health Visitors try to prevent abnormal parenting practices. Five lay visitors and a coordinator provide follow-up and support to new parents. Assessment is made of new parents' family situation and need for services; home visits provide information on child development, emotional support, information and referral, and concrete services, such as transportation and recreational opportunities. The program is based on the English model of "home-visits."

DISTRICT OF COLUMBIA

HOME AND SCHOOL INSTITUTE
Trinity College
Washington, D.C. 20017

Dorothy Rich
(202) 466-3633

The purpose is to develop family-centered learning in the home. The focus is on the parent as educator and the program designs practical, everyday ways for parents to strengthen the home-learning environment. The home is used as a learning center with built-in learning devices; the kitchen, bathroom, and living room are used to supplement and reinforce the three Rs. The object is to help raise the achievement level of the child by shoring up the confidence of the parents as teachers. Parents attend a workshop where they learn how to use hats, pots, socks, going shopping, etc. as learning tools. The Institute provides training and materials to professionals who, in turn, work with parents and local schools in strengthening the role of parents as teachers and the relationship between home and school.

HOME BASED HEAD START
Administration for Children, Youth, and Families
Department of Health and Human Services
P. O. Box 1182
Washington, D.C. 20013

Ray Collins
(202) 755-7700

This is the national office within the Office of Human Development, Administration for Children, Youth, and Families. For information on home based Head Start programs in your area, you may write one of the regional offices or the national center. Home based Head Start resource materials, such as a guide, an annotated bibliography, and an audio-visual orientation to home based Head Start are also available through the national office. There are also seven Head Start Training Centers throughout the country. The program was begun in 1972 as an additional approach for delivering Head Start type of services. It focuses on enhancing the quality of children's lives by building upon existing family strengths and assisting parents in their role as the first and most important educators of their own children. The program is currently serving 27,000 children.

ILLINOIS

CHILD ADOLESCENT PROGRAM
Champaign County Mental Health Center
600 E. Park
Champaign, IL 61820

Arnold Miller, Director
(217) 351-8811

Public funding

Community and home based treatment planning for multi-problem adolescents and families. Focus is clearly on the identified problem adolescent, but counseling is extended into the home and natural environment. Focus is on youth who commit acts of violence and/or manifest severe psychological dysfunction. Assessment/treatment planning covers seven life domains. Eighty-five percent of the youth have been able to continue living at home.

ELEMENTARY AND EARLY CHILDHOOD EDUCATION (ERIC/EECE)
College of Education
University of Illinois at Urbana-Champaign
1310 S 6th Street
Champaign, IL 61820

Lilian G. Katz, Ed. D.
(217) 333-1386

The Urbana program is one of sixteen clearinghouses which constitute a national network funded by the National Institute of Education.

It serves as an Educational Resources Information Center on Elementary and Early Childhood Education, which collects documents about the development and education of children from the prenatal period through age twelve. Quick response to telephone and letter requests are made at no charge; quarterly newsletters, ten-day computer search service, new papers and bibliographies, and free resource lists are also available.

KALEIDOSCOPE, INC.
Satellite Family Involvement Program
530 North Center
Bloomington, IL 61701

Milton Breed
(309) 827-0407

Private auspices

As part of a continuum of programmatic alternatives to children and families, the Family Involvement Program functions as the agency's alternative to residential placement. The intent of the program is to provide comprehensive services to family systems. Their philosophy is that biological and psychological families have the right and ability to remain intact. Workers function in a role similar to extended family members. The program provides counseling, advocacy, recreation and concrete services to families.

IOWA

ALTERNATIVE TREATMENT ASSOCIATES
Fayette, IA 52142

Neal Sheeley
(319) 425-4559

Private auspices, state funds

Intensive, comprehensive work with families in the home as alternative to placement. Serves 5 rural counties and families with children in placement or at imminent risk of placement. Over 26 months, nine of every ten referred children remained at home. Average cost per family was $2,591. Average duration of service was 13.6 weeks per family with a six month limit on continuous service.

FAMILIES
101 West Main
P. O. Box 130
West Branch, IA 52358

Michael Ryan
(319) 643-2532

Private auspices, state funds

Professional team provides intensive and comprehensive in-home services to families in a nine-county area as an alternative to out-of-home placement. Arrangements are made to be in the home several days a week, if necessary. A treatment program is adapted to meet the family's individual needs. Staff members are always available and have case loads of three to five families. Average service duration is 15 months. Reports 91 percent success rate at a cost of $4,165 per family.

FAMILIES, NORTHEAST IOWA
P. O. Box 806
Maquoketa, IA 52060

Timothy J. Acton
(319) 652-4958

Private auspices, state funds

Provides intensive in-home treatment services to families who otherwise face removal of one or more children. Professional social workers and homemakers, with caseloads of three to four families, provide a wide range of therapeutic and supportive services to maximize inherent strengths of individuals and the family system. In addition, an in-home service program for juvenile delinquents is offered as an alternative to incarceration. Average length of service is 7.2 months at a cost of $6,616. per family.

GERARD SCHOOLS OF IOWA, INC.
In-Home Treatment Program
Box 1353
Mason City, IA 50401

Rita Paxson
(515) 423-3222

Private auspices

Begun in 1978, the primary objective of the program is to effectively provide services which will prevent unnecessary out-of-home placement; secondary, to facilitate the earliest possible return of the child if placement is required. More than 93 percent of the families have remained intact and in 50 percent of the families whose children had already been placed, the children returned during the four month period of in-home service.

IN-HOME FAMILY SUPPORT SERVICES
Iowa Children's and Family Services
1101 Walnut Street
Des Moines, IA 50319

Linda Ross
(515) 288-1981

Private auspices, multi-service, multiple funding

An ecological approach to provide a coordinated family intervention service designed to allow youth to remain in their own home through the application of a range of family-strengthening efforts. Service delivery centers around the use of in-home family support workers, each with a caseload of four families. The worker is responsible for not only assessment and diagnosis of the family but also for the execution of the plan developed for the family. Average length of service was 7.8 months and is operational in 23 counties. Workers have four to six families.

SYSTEMS UNLIMITED
Family and Child Training Program
1058 Williams
Towncrest
Iowa City, Iowa 52240

Diane Verkuilen
(319) 338-9212

Private auspices, multiple funding

Provides services to parents or guardians to enable them to maintain their developmentally disabled children in their homes. Counseling and educational services to children to age eighteen and to their families. Home visits are made to develop program plans in the area of daily living, activities, recreation, and social-developmental stimulation.

KANSAS

FAMILY SUPPORT PROJECT
Kansas Department of Social and Rehabilitation Services
2700 West 6th St.
Topeka, KS 66606

Nancy Parker
(913) 296-3284

Public funding

Emphasis is on prevention of out-of-home placement and on reunification of families with confirmed child abuse and neglect. In July, 1979, four areas covering twenty-five counties were selected as project sites for the Family Support Worker Program. Two were urban and two were rural. Through January, 1982, a total of 653 families and 1,216 children were served. The percentage of out-of-home placements as a result of child abuse and neglect has been reduced to almost half the percentage placed prior to the Family Support project.

HEALTHY START-HOME VISITOR PROGRAM
Bureau of Maternal and Child Health
Kansas Department of Health and Environment
Forbes Field
Topeka, KS 66620

Helen Kingston Martin
(913) 862-9360 - Extension 442

Public auspices, state/local funds

The program began as a three-year federally funded demonstration project in 1977. The purpose was early identification of intervention with high risk families. Trained lay home health visitors are supervised by the local health departments in fifteen counties. Lay visitors are carefully screened for their ability to provide the support a good grandmother might provide, with an overlay of a wide knowledge of community resources in health, mental health, and welfare. These emotionally mature, experienced, successful mothers are also provided training and they refer all special problems to the supervisor. Total births in the catchment area annually is approximately 8,000. During FY '80, sixty percent of those families were served.

MICHIGAN

PARENTS AND CHILDREN TOGETHER
Room C-34 Knapp Building
71 E. Ferry
Detroit, MI 48202

Dorothy Kispert
(313) 577-3519

Funding from the Department of Family Resources and Wayne County Department of Social Services

Intensive in-home intervention with low-income families to prevent unnecessary foster care placement. Focus is on parenting, house management and building social supports. Home-management specialists are skilled in child development and visit families on a regular basis, several times a week. Alteration of the parent's childrearing and home-management practices is a major focus. Parents and Children Together counselors assist client/families in learning parenting skills, child discipline, organizing a wholesome home environment, improving health, hygiene and nutrition standards, stabilizing family income, ensuring appropriate education of the children, building self-esteem and self-efficiency, etc. Workers have caseloads of 7 to 8, with service duration of seven months. Parents and Children Together reports a 77 percent success rate at a cost of $2,254 per family.

MINNESOTA

BROWN COUNTY PROGRAM
Brown County Family Service Center
114 N. State Street
New Ulm, MN 56073

Thomas Henderson, Director
(507) 354-8246

County funds

Began as an eighteen month pilot project in 1980, with child abuse and neglect families and in-home casework, up to twenty-five hours per week at a cost of $3,500 per family for duration of service. Program was discontinued for six months and then reinstituted because costs were greater without it and greater flexibility was added with a three-tier staffing pattern (professional social worker, degreed case aide, and a Family Service aide). Costs were reduced to $2,800 per family served. Families selected for service must have a high degree of individual and family dysfunction and high potential for placement without in-home service.

DAKOTA COUNTY PROGRAM
Dakota County Human Services
357 Ninth Avenue North
South St. Paul, MN 55075

Shirley Utzinger, Director
(612) 457-0711

Public funding

Purpose is to prevent and/or shorten out-of-home placements and to improve financial recoveries through early planning and follow-up. Staff consists of eight family service aides, seven social workers, and two supervisors. Service duration is eight to ten weeks. Placements reduced 17%, saving $500,000 over one year.

FAMILY STUDY CENTER
Hennepin County Welfare Department
Family Services Division
A-1500 Government Center
Minneapolis, MN 55487

Carole Murphy
(612) 348-5830

Federal funding (demonstration project)

Intensive and comprehensive supportive services to keep families intact. Goal-oriented counseling, contracts, and time-limit agreements utilized. When placement is necessary, a permanent plan is negotiated early, either to return home or through termination of parental rights.

FREEBORN COUNTY PROGRAM
Freeborn County Welfare Department
Courthouse
Albert Lea, MN 56007

Fred Silbaugh, Director
(507) 373-6482

Public funding

Social worker/home service provides team. Provides service of eight to twenty hours per week, depending on family needs, supplemented with weekly mothers' group, all Title XX services for which family is eligible, weekly staffings, and consultation and publicity by the community child protection team.

HOME HEALTH AIDE PROJECT
Minneapolis Health Department
250 South Fourth Street
Minneapolis, MN 55415

LaVohn E. Josten
(612) 348-2684

Funded by United Way and Community Health Services Act of Minnesota

Home Health Aides work with high risk families with parenting problems. The aide works in conjunction with the public health nurse, who assesses the family's needs and determines if benefits could be derived from this additional service. The conceptual framework which guides the program is whether the aide can positively affect the parents' needs (i.e., self-esteem, support, etc.) or whether the children's care provided by the parents will improve. The aide spends one to two hours in the family home, one to five days a week. Pragmatic help in areas of parenting

education and skills, plus emotional support, are offered. Aides also can supply transportation needs and plan outings for the mothers. Aides do modeling by playing with the children and working on arts/crafts with mothers.

INTENSIVE IN-HOME TREATMENT PROGRAM
Lutheran Social Services
Box 477
Fergus Falls, MN 56537

William Metcalfe
(218) 736-7549

Private auspices; county funds

Program began in October, 1981. Currently serves Ottertail and Becker counties in Minnesota. Professional staff live in the region they serve and have maximum caseloads of five families. Average length of service is six months with a cost of $2,974.14 per family. Requirements are that the family have at least one child at high risk of out-of-home placement.

LESUEUR COUNTY PROGRAM
LeSueur County Welfare Department
Courthouse
Le Center, MN 56057

Allen Zumach, Director
(612) 357-2251

Public funding

Increased services for Child Abuse and Neglect families with case worker/child protection worker team. Sliding fee scale with service in three-month blocks with average length of service between six and nine months.

SPECIAL CARE PROGRAM: EXPLORING A FUTURE OF PREVENTION
Ramsey County Mental Health Department
150 E. Kellogg Boulevard
St. Paul, MN 55101

Chad C. Breckenridge
(612) 298-5920

Public funding

In-home treatment approach which attempts to identify families with strong potential for dysfunction and to involve them in relationships that will be psychologically therapeutic, while attending to health needs and educational insight as well.

ST. LOUIS COUNTY PROJECT
St. Louis County Social Service Department
422 West Third Street
Duluth, MN 55806

Robert Zeleznikar
(218) 727-8231

Public funding

A service delivery system to families with children, geared to comprehensive early intervention. Provides supportive services that maintain the family unit and increase worker time expended on preventative and remedial work. Additional staff and training costs are $300,000 annually, but reduction in placement levels for 1980 over 1978 shows a comparative annual placement expenditure reduction of $1,075,000. Referrals are screened by the supervisor and assigned to a team consisting of social worker and family living specialist, who explain the program and rescreen for degree of commitment. Given a commitment, a contract for service is negotiated. Service is limited to a maximum of sixteen hours per week.

SURVIVAL SKILLS INSTITUTE, INC.
1420 Russell Avenue North
Minneapolis, MN 55411

Geraldine Carter
(612) 521-9828

County, State, United Way and Dayton Hudson Foundation funds

Organized in 1978 to meet the preventive services needs of black families in the "core" area of North Minneapolis. Provides in-home counseling/education to parents of children in foster care or at risk of abuse and neglect. Cultural sensitivity framework builds on the personal and cultural strengths. Professionals, paraprofessionals and volunteers participate in a variety of education, support, and enrichment groups.

TODD COUNTY RURAL FAMILY DEVELOPMENT
Todd County Social Services
Courthouse Annex
Long Prairie, MN 56347

Darryl Meyer, Director
(612) 732-6181

Public funding

This is primarily a community development/public education program. Purposes are to reduce recurrence of child abuse and neglect in a multi-county area, provide ongoing consultation and training for paraprofessionals working with families, and to increase schools' awareness and responsibility. Service consists of weekly home visits, support groups, use of literature, and referral for counseling.

WINONA COUNTY DEPARTMENT OF SOCIAL SERVICES
Box 163
Courthouse
Winona, MN 55987

Darrell Warneke
(507) 452-8200

County auspices, public funds

Program provides services necessary to assist families at risk of placement to remain together. In addition to Department of Social Services staff, four other community agencies have re-assigned existing staff to family based services. Primary focus is to provide in-home family support, education, and therapy necessary to alter patterns which are threatening family maintenance.

MISSOURI

FERGUSON-FLORISSANT SCHOOLS
Parent-Child Early Education
655 January
Ferguson, MO 63145

Marion M. Wilson
(324) 595-2355

Funded by school district revenues and Title I

A comprehensive education program for children two months through four years old. Home teaching is given priority to make the most of the early years and form a teaching relationship with parents. Weekly home teaching visits are made to provide activities for parents to teach their children during the week. Saturday school is provided for four-year olds, which includes assessment, diagnosis, and follow-up of the child. Child development consultants also work with teachers and/or parents. During the one-hour weekly home-teaching visits, the teacher involves the parents and children in five to seven learning activities. Through the week, parents continue informally with concept and skill development games. Four-year olds start their half-day school on Saturdays by participating in total group activities, then rotating in small groups to four different learning-centers led by a teacher or parent. In addition, provided is an education/support program for first time parents in the last trimester of pregnancy with three year follow-up and a resource center for parents of young children.

MONTANA

FAMILY TEACHING CENTER
107 7th Avenue
Helena, MT 59610

Bailey Melineaux
(406) 443-4530

Private auspices; state, United Way, City, County plus sliding fee

Home based social learning treatment program for families. Extensive use of communication by phone, parenting salaries, and self-control techniques are utilized. Parent/adolescent negotiation problem solving. Professional staff served 120 families annually.

NEBRASKA

RESPITE SERVICES
Eastern Nebraska Community Office of Mental Health
602 South 45th Street
Omaha, NE 68105

Donna R. Eyde, Ph.D.
(402) 541-4522

Public funding

Respite services designed to support families with disturbed children. This program provides families with a series of respite options, such as sitter services, home support services, crisis placement services, parent training, and temporary foster family placement services.

NEW JERSEY

FAMILY LIFE CENTER
Family Service Association of Atlantic County
4000 Black Horse Pike
West Atlantic City, NJ 08232

Mark Yetsko
(609) 645-2942

Private auspices; private, state and local funding

This program is an alternative to placement for the treatment of protective service families. Program assists parents to learn about child development, parenting skills, increase self-esteem and inter-personal skills, constructive coping, use of community resources and overcoming social isolation. Professionals provide 20 hours of service per week. Average duration of service is one year at a cost of $55. per service hour. Graduated fee scale and third party payments are utilized.

NEW YORK

INTENSIVE FAMILY SUPPORT PROGRAM
Hillside Children's Center
1183 Monroe Avenue
Rochester, NY 14619

Rita Augustine, Direct r
(716) 266-4330

Private auspices; state, county, endowment and United Way funds

Social workers provide services in the home in a team relationship with paraprofessionals from Hillside's Visiting Friend/Parent Aide program. Goals are to prevent foster care placements. If placement becomes necessary, there is positive parental involvement in the transition to residential treatment. Average caseload size is 10 to 12 families and service duration averages six to seven months. Average cost per family served is $1,387. Eighty-nine percent are successfully discharged without placement. In-home components are also developing in the agency's Emergency Shelter and Persons In Need of Service (PINS) non-secure detention programs.

LOWER EAST SIDE FAMILY UNION
91 Canal Street
New York, NY 10002

Alfred B. Herbert
(212) 925-0728

Private auspices, multiple funding

Family-centered, community-based program organized in 1971. Serves primarily Hispanic population.

Coordinates the efforts of service agencies and families by linking the family with the appropriate resource. Seeks to keep families together by helping them use existing agencies more effectively. Family Union teams consist of a team leader, five social work associates, and six homemakers. The fourth team concentrates on community organization. Workers coordinate services to clients, arrange family service contracts with agencies and monitor them. Homemakers relieve the immediate physical demands on families (babysitting, etc.) and instruct parents in household skills. The community organization team concentrates on finding ways to

strengthen neighborhood cohesion and agency cooperation. Of 193 families determined to be high risk for family breakdown, 11 required placement of 22 children and 17 of those children were returned home within 60 days. Costs were about $1,500 per family served (1977 report).

MOTHER-CHILD HOME PROGRAM OF THE VERBAL INTERACTION PROJECT
5 Broadway
Freeport, NY 11520

Phyllis Levenstein, Ph.D.
(516) 868-2171

Combines child's play with mother-child dialogue to foster the cognitive and socioemotional development of low income two-to-four-year- olds. This is done through a home based early education program. Mother and child are in the program for two years with the goal of increasing the mother's interactive behavior, which in turn will enhance the child's development. Home visits take place twice a week for seven months during each of the two program-years. A "Toy Demonstrator" visits mother and child together. Without direct teaching, she models for the mother techniques that the mother can use with her child in play with toys and books called, Verbal Interaction Stimulus Materials (VISM). The mother is encouraged to take over the play activity early in each session.

NATIONAL COUNCIL ON HOME-MAKERS AND HOME HEALTH AIDES
69 Irving Place
New York, NY 10003

Florence Moore
(212) 674-4990

Provides current information on various projects regarding innovative work by homemakers and the varied utilization of the homemaker specialist in home based service programs.

NEW YORK STATE DEPARTMENT OF SOCIAL SERVICES
Office of Human Resource Development
40 N. Pearl Street
Albany, NY 12243

Donald Snider, Director
(518) 474-9645

New York's Child Welfare Reform legislation (1979) is intended to restructure the financing and management of child welfare services by establishing a new funding mechanism for services which are alternatives to foster care. Seventy-five percent open-ended reimbursement is available when a local official makes a finding that a child would be placed within 60 days without such services, or when such services would likely result in return home or adoption.

PARENT AIDE COMMUNITY EFFORT OF ERIE COUNTY
Erie County Medical Center
462 Grider Street
Buffalo, NY 14215

Savina Zolte, Director
(716) 898-4296

Private auspices

This program utilizes 24 volunteers who focus on befriending the parents in instances of child abuse and neglect. An initial 12 week training program and monthly in-service meetings are provided. Volunteers make at least two house visits per week and provide 24 hour availability. The program coordinator meets regularly with the volunteers. The resource was created by the Junior League, National Council of Jewish Women, and the Erie County Medical Society Auxiliary.

PEDIATRIC AMBULATORY CARE DIVISION
Albert Einstein College of Medicine
Bronx Municipal Hospital Center
Pelham Parkway and Eastchester Road
Bronx, NY 10461

Ruth Stein, M.D.
(212) 430-5000

A pediatric home care program at the Bronx Municipal Hospital Center, which serves as a special ambulatory care unit for children who are seriously or chronically ill and who are not being adequately serviced through the more traditional ambulatory facilities.

NORTH CAROLINA

CUMBERLAND COUNTY DEPARTMENT OF SOCIAL SERVICES
Child Protection and Placement Section
P. O. Drawer 64399
Fayetteville, NC 28306

E. C. Modlin
(919) 323-1540

Instituted in response to the "merry-go-round" of mechanical recycling of children from one attachment-detachment to another under the guise of "protection." The program reflects an attempt to integrate and coordinate departmental services to families and children from portal of entry to exit of the service system. Fragmented, multi-sectioned agencies focusing on a single aspect of a task not only fail children and their families but often damage and even insure continuance of the "merry-go-round." This agency has attempted (with some success) to modify this procedure.

PARENT EDUCATION PROGRAM
University of North Carolina
School of Education
Peabody Hall 037A
Chapel Hill, NC 27514

Hazel Leler, Ph.D.
(919) 966-2436

Federal funding

The emphasis is on providing educational services directly in the home, so that the home might lead to better school and life performance. Paraprofessionals (parent-educators) are utilized, along with teachers, to develop home-learning activities growing out of the classroom program. Emphasis is placed on the development of parents as partners in the educational program for their children. The parent-educators spend one-half their time in home visits and the other one-half working in the classroom, planning with the teacher, reporting to the teacher about her visits, and participating in in-service education. Home visits are usually made once a week in which the major activity is the demonstration of tasks to the parents on how to increase the child's intellectual, personal, and social development.

OREGON

OREGON DEPARTMENT OF HUMAN RESOURCES
Children's Service Division
Intensive Family Services Project
Public Service Building
Salem, OR 97310

The purpose of the four Children's Services Division Intensive Family Services projects is to test the effectiveness of intensive short-term services as a means of averting placement. The four projects are by service contract. Client eligibility is limited to families with one or more children programmed for placement by the Substitute Care Screening Committee. Service is limited to ninety days to provide comparison to traditional approach. Program must be replicable by Children's Services Division. The four demonstration programs include:

ASTORIA PROJECT
Children's Services Division
Clatsop Branch
P. O. Box 119
Astoria, OR 97103

Tony Williams, Manager
(503) 325-4811

The Astoria Project vendor is Boys and Girls Aid Society and children served are ages 0-18 years. Worker/client ratio is 1:9. At end of year one, 27 of 31 families served avoided placement (87%).

CLAKAMAS PROJECT
Children's Services Division
Clakamas Branch
P. O. Box 133
Maryhurst, OR 97063

John Barr, Manager
(503) 653-3140

The Clakamas Project is contracted to Christie School and children served range in age from 0-18 years. Worker/client family caseload is 10. Data issued at the end of one year indicates 74 of the 77 families served avoided placement (94%).

PENDLETON PROJECT
Children's Services Division
Umatilla Branch
P. O. Box 1127
Pendleton, OR 97801

Virginia Rose, Manager
(503) 276-9220

The Pendleton Project is contracted to Joe Paul Associates and children served are age 12-18 years. Worker/client family caseload is 7. Data issued one year after project began indicates service to 43 families and 42 avoided placement (98%).

PORTLAND PROJECT
Children's Services Division
Southeast Multnomah Branch
4506 Belmont Street S.E.
Suite 201
Portland, OR 97215

Charles Kurtz, Manager
(503) 238-7513

The Portland Project is contracted to Catholic Family Services and children served are ages 10-18. Worker/client family caseload is 6. Data issued at end of one year after project began indicates 96 of 107 families served avoided placement (90%).

The Oregon Department of Human Resources, Children's Services Division, began a Supportive/Remedial Day Care Program and a Parent Training Service in 1979. These programs are intended to provide day care and support to families with severe mental, physical and emotional problems. The goal is to strengthen and maintain families, reduce the evidence of substitute care. Supportive/remedial day care never stands alone. These services are provided in tandem with other Children's Services Division and community resources. The service is also available to families receiving preventive/restorative services, protective services, and to families with children in substitute care when it is deemed that such service would assist in return home.

PENNSYLVANIA

ASSOCIATION FOR JEWISH CHILDREN OF PHILADELPHIA
1301 Spencer Street
Philadelphia, PA 19141

Joseph Taylor
(215) 549-9000

Private auspices, multiservice, multiple funding

Intensive, comprehensive in-home services program began in 1967. Professional/paraprofessional teams (including volunteers) provide a number of services as teacher assistant, big brothers and sisters, tutors, recreational aides, transportation, clerical help, etc. Protected caseload for highly problematic families served an average of two years for about $3,000 per family. Rationale that long-term support is often preferable to long-term placement.

YOUTH SERVICES, INC.
410 North 34th Street
Philadelphia, PA 19104

Theodore Levine
(215) 222-3262

Private auspices, multiple funding

Teams of one caseworker and four family care workers work with eight families on home-management skills, modeling, parenting techniques. Families at risk for break-up are referred from other agencies. Program based on philosophy that it is not necessary to place in order to provide basic services. Costs reported for 1976-77 were about $10,000 per year per family served.

SOUTH DAKOTA

DEPARTMENT OF SOCIAL SERVICES
Sioux Falls Home Based Project
P. O. Box 1504
Sioux Falls, SD 57101

Mel Harrington
(605) 339-6477

This program began in 1981 with a professional/paraprofessional staffing pattern. References come from protective services. Basic criteria for referral is that one or more of the children are being considered for removal from the home, or may already be in placement. Purpose of the program is to allow families to resolve problems and avoid placement. Both voluntary and involuntary cases are accepted. Process evaluation data reveal significant cost savings and effective services.

WEST RIVER CHILDREN'S CENTER
The South Dakota Children's Home Society
Keystone Route 38A
Rapid City, SD 57701

Frederick G. Tully
(605) 343-5422

Private auspices; public funding

Teams of professional therapists work intensively with high risk families in their homes. Workers carry three families per worker and one-fourth of the families are American Indian. Average length of services is five and one-half months, at a cost per family of $3,178.

TENNESSEE

CHILD HEALTH AND DEVELOPMENT PROJECT
Tennessee Department of Public Health
1522 Cherokee Trail
Knoxville, TN 37920

Funded by the Tennessee Department of Public Health, Department of Human Services, and Appalachian Regional Commission

The project primarily provides health care; but also promotes parenting skills as well as social and intellectual health of children from birth through six years of age. Services provided include early education, well-child care, social services, nutrition, health screening, and prenatal classes. Multidisciplinary teams of public health nurses, social workers, and home educators work together to enhance the parents' role. Services are provided through home visits and clinics. Physical examinations, immunizations, and counseling are provided. Parent involvement is the core of the project activities.

CLINCH-POWELL EDUCATIONAL COOPERATIVE
P. O. Box 279
Tazewell, TN 37879

William Locke and
Vicki Dean
(615) 869-3605

Federal funding

Provides training and technical assistance to programs delivering services to young normal and handicapped children and their families. It is designed as an early childhood education program with curriculum guides in the areas of safety, nutrition, and language development, as well as a weekly Parent's Guide to Activities for Young Children. Parents are involved as the primary teachers of their children. A specially-trained paraprofessional home visitor makes regularly scheduled visits to the home. The home visitor delivers the program, meets with community groups, and supports the family.

TEXAS

BARRIO COMPREHENSIVE CHILD HEALTH CARE CENTER
1102 Barclay
San Antonio, Texas 78207

Ora Prattes
(512) 434-2368

Multiple funding

The Health Clinic provides health screening, immunization, and treatment. It also offers screening for special developmental disabilities, especially pertaining to language, learning, and emotional problems. Health screening is provided, at no charge, to families with incomes below the poverty level. Part-time physicians conduct physical examinations and provide treatment, while a team of registered nurses, licensed vocational nurses, and nurses aides take health histories and do workups on children. Community aides, under the supervision of a social worker, spend each day in the community talking to parents about the health of their children, encouraging them to use the medical services offered, and ensuring that children who have problems get back to the clinic for required treatment. Program has expanded to include children with special developmental disabilities.

FOSTER GRANDPARENTS OF BEXAR COUNTY, INC.
4502 Medical Drive
San Antonio, TX 78284

Deborah Dunlap, Coordinator
(512) 223-6361 Ext. 501

The national federal volunteer foster grandparent program was initiated in 1965. While many concentrate on children in placement, the San Antonio program trains and utilizes foster grandparents to work with children and their families in the home.

UTAH

EXCEPTIONAL CHILD CENTER
UMC 68
Utah State University
Logan, UT 94322

Glenn I. Latham, Ed.D.
(801) 750-1981

Public auspices, Department of Agriculture funding

Utilization of generic extension agents with teams of family life experts to provide in-home services to rural families with special needs. Serves the handicapped and their families directly through the Cooperative Extension Project for the Handicapped with resources available such as packaged instructional materials, parent newsletter, toll-free telephone service, parent resource library, and multimedia collection.

VIRGINIA

INTENSIVE SUPPORTIVE SERVICES TO MINIMIZE FOSTER CARE PLACEMENT
Virginia Department of Public Welfare
Richmond Regional Office
5021 Brook Road, Second Floor
Richmond, VA 23227

Thelma Ware, State Coordinator
(804) 264-3050

Federal funding

A demonstration project was conducted by the Richmond City Department of Public Welfare, Bureau of Social Services, Family Services Division, from 1978-1980. The thrust was to determine if use of Title XX services and contingency funds for services not listed under Title XX would minimize foster care placement of children from ADC and General Relief families. Experimental and control group comparisons are made. Families in the experimental group showed significantly greater improvement and reduction of risk of separation. When experimental group children were placed, they returned home in less than ninety days, except in instances of long-term medical care. The experimental group reported significantly greater satisfaction with service than the control group, which received routine services. Important lessons were learned for program design.

WASHINGTON

HOMEBUILDERS
5410 North 44th Street
Tacoma, WA 98407

David Haapala
(206) 752-2455

Private auspices, multiple funding

Crisis intervention in the home. Therapists available around the clock to enter homes of families in crisis to help prevent placement of a family member away from home. Service can be as intense as necessary for a six-week period to facilitate resolution of the immediate crisis and to teach new skills. Caseloads of 2 to 3 families with staff of twelve Masters Degree workers. Program reports 92% placement prevention with 918 families at a cost of $1,600 for crisis intervention service and $6,000 for family alternatives to psychiatric hospitalization.

WASHINGTON STATE DEPARTMENT OF SOCIAL SERVICES
Bureau of Children's Services
State Office Building
Mail Stop OB-44T
Olympia, Washington 98504

Marian Demas
(206) 753-7002

Washington enacted legislation in 1977 (SB3116 and subsequent related legislation) which limited the courts' jurisdictional function and restricted the definition of dependency. Crisis intervention to avoid unnecessary placement is extended, with three levels of intensity of service.

For additional information on Washington's effort to institutionalize family based alternatives to foster care, contact the Washington State Department of Social Services, Bureau of Children's Services.

WISCONSIN

CHILDREN'S SERVICE SOCIETY OF WISCONSIN
610 N. Jackson Street
Milwaukee, WI 53202

Wayne Kudick
(414) 276-5265

Private auspices, multiple funding

Children's Service Society of Wisconsin, a private, nonsectarian, statewide, multi-service agency, added a home based family centered program component in 1981. The agency has a diverse funding base. The home based family centered program provides in-home services to delinquent youths and their families as an alternative to placement. Family based services are being effectively utilized to deinstitutionalize delinquent, developmentally disabled, and emotionally disturbed children.

COMMUNITY YOUTH AND FAMILY AIDS
Bureau for Children, Youth, and Families
Division of Community Services
P. O. Box 7851
Madison, WI 53707

Carol Henry
(608) 266-3443

Developed as a result of a 1978 DHSS Children's Services Study which examined a wide array of children's issues and focused in part on the juvenile justice system. This study found that services at the local level for youth committing status and delinquent acts were scarce and frequently poor in quality. The revised Children's Code of November 1978 offered new dispositional options but no resources with which to develop local services. The problems identified were the result of fiscal relations between the state and counties. State juvenile correctional services were "free" to the counties (i.e., there was no charge to the counties for such services), but service provided locally by the counties had to be paid out of individual county budgets for social services. Counties, therefore, had an incentive to place youth in state custody. As a result, juveniles who could be more appropriately served in their home communities were often placed in state correctional institutions. Youth Aids Program has three general goals:

1. To improve the quality and range of community-based services for the Youth Aids Target Groups.
2. To provide funding for the dispositional options offered the courts by the Revised Children's Code.
3. To neutralize the previous fiscal incentive to place youth in state correctional facilities rather than community-based programs, and thereby to reduce inappropriate institutional placements.

Results are impressive.

FAMILY AND COMMUNITY SERVICES
St. Aemilian Child Care Center, Inc.
8901 West Capital Drive
Milwaukee, Wisconsin 53222

Robert Blazich
(414) 463-1880

Private auspices; public funding

A multidisciplinary team provides intensive and comprehensive social and mental health services to disturbed children, their families, schools, and communities. Services are provided families with children between the ages of six and sixteen who are exhibiting behavioral problems at home, school, or in the community. In addition, services are provided for children diagnosed as learning-disabled. The team is available for crisis intervention twenty-four hours per day, seven days a week for six to twelve months.

FAMILY SERVICE ASSOCIATION OF BROWN COUNTY, INC.
Intensive In-Home Services
1546 Dousman Street
Green Bay, WI 54303

Kenneth Utech
(414) 499-8768

Begun in 1982, the purpose is to resolve problems which are threatening family intactness, whether internal or between family and community. Up to 24 hours are given to assessment during the first two weeks, after which three to four hours per week are devoted to treatment and up to two and one-half hours devoted to family life education. Contracts with families are utilized and evaluation component and follow-up are included.

HOME AND COMMUNITY SERVICES
2001 West Broadway
Madison, WI 53713

John M. Borquist
(608) 221-8786

Private auspices
Funded by Lutheran Social Services of Wisconsin and Upper Michigan

Home and Community Services provides services to adolescents and family in the home, school, and community. Staff members are professionally trained and experienced family workers, youth specialists, and education specialists who work in teams with families to provide counseling, planning, liaison services, and crisis intervention.

HOME AND COMMUNITY SERVICES CENTER
Jefferson County Human Services
P. O. Box 375
Jefferson, WI 53705

Mark Quam
(414) 674-3105

Funded by Jefferson County Human Services

The program is part of an integrated Mental Health/Social Service facility which has child and adult service units in the areas of mental health, developmental disabilities, and chemical dependency. Specifically, the Home and Community Services Center staff spends a great deal of time in the homes of families with severely behavior-disordered children, either developmentally disabled or mental health by label. Families, extended family, relative, and friends are invited and encouraged to participate.

HOME AND COMMUNITY TREATMENT
Mendota Mental Health Institute
301 Troy
Madison, WI 53704

Mary Ann Fahl
(608) 244-2411

Public auspices

Provides family treatment and child-management training to the families and teachers of emotionally disturbed children, ages three to ten. The program utilizes behavior modification techniques, emphasizing demonstration, modeling, and coaching in the home or school. An interactional systems model is utilized, rather than the notion of a single "client." This program evolved in the late sixties out of the Mental Health Institute. Professional staff with three to four families have multi-disciplinary behaviorial orientation. Of 161 families served from twelve to thirteen months, over ninety percent (90%) were effectively served at a cost of $10,829 per family.